



# PREVENTION

## Highlights

# Keeping Kansas Facilities Safe

### In This Issue

- Active Shooter Variance Changes
- Fire Watch Procedures
- CMS Facility Corridor Safety Rules
- Campfire Safety Tips



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### Our Mission

The Office of the State Fire Marshal (OSFM) is dedicated to protecting lives and property from the hazards of fire or explosion and will promote prevention, educational and investigative activities to mitigate incidents, promote life safety and deter crimes.

### The Fire Prevention Division

The goal of the Fire Prevention Division is to reduce the potential impact of fire and explosion hazards where people live, work and congregate (other than one- or two-family dwellings) through code enforcement, inspections, plans review, licensing, and public education.

### Prevention Highlights

Prevention Highlights is published quarterly to provide facility managers and others with information necessary to operate fire-safe facilities.

Brenda McNorton ..... Chief of Prevention

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Connect with us!



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# Edu-Note

by Joel



## CONTACT JOEL

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Nearly two years has gone by since taking the position of the education consultant for the Office of the State Fire Marshal. It has been a busy couple of years learning and experiencing so much. From teaching classes at nursing homes, hospitals and assisted livings, to schools. It has truly been a great experience meeting so many wonderful people across this wonderful state. I was able to take a very valuable training class this month, the Basic Life Safety Code. The class focused on the details of the 2012 Life Safety Code, which is where the code requirements for 17 providers and suppliers that are under CMS are found. This nearly week-long course really helped me to have a better understanding of the requirements and survey procedures for those types of facilities. I look forward to this helping me in my day-to-day work and now having the ability to learn in person from the Life Safety Code inspections. As we are nearing to summer, do not forget that if your facility needs training on the fire code, please reach out to me and I will be happy to come and make a visit or conduct a webinar. My direct phone number is 785-296-0659 and my email address is joel.c.beckner@ks.gov.

*-Joel Beckner, Education Consultant*

## Welcome...

### Randy Hegwald, Rod Leiker join our Fire Prevention Inspection Team

The Office of the State Fire Marshal (OSFM) is pleased to welcome Randy Hegwald, who has joined our Prevention team as a Fire Prevention Inspector for Coffey, Lyon, Osage, Franklin and Douglas counties. Randy worked for the City of Yates Center in their public works department and as a fire investigator and training officer. He brings over 18 years of fire service experience to the Office of the State Fire Marshal.

Randy lives in Yates Center with his fiancé, Becky, and two children, Melanie and Caleb. He enjoys being outdoors, fishing, kayaking and grilling.

"I always wanted a career in the fire service, and this is the perfect fit," Randy said. "I am very grateful for the opportunity to work with OSFM."



We are also pleased to welcome Rod Leiker to the Fire Prevention Inspection team, covering the north-central region in Kansas. Rod comes to OSFM from Fort Hays State University where he worked as an environmental safety technician. He brings over 20 years of experience to the team.

Rod lives in Hays with his wife and enjoys camping, fishing and hiking in his spare time.

"When this opportunity presented itself," Rod said, "I felt like it was something I could really contribute to."

**Welcome Randy and Rod!**



# A guide to Power Strips for Medical Facilities

By Joel Beckner, Education Consultant

It is important to understand that there is not a single type of power strip that is suitable for every application in your facility. Each type of power strip has a specific purpose and should not be used for a different purpose than what it is designed and approved for.

Power strips (including surge protectors) can be divided into three primary application groups that use different technologies and meet varying UL standards. They can also be divided into medical-grade power strips, i.e. power strips that meet the requirements of medical equipment, and those that do not. Medical-grade power strips meet UL 60601-1 or UL 1363A, and they can be used in the “patient care vicinity.” Power strips that do not meet UL 60601-1 or UL 1363A cannot be used in the patient care vicinity. The patient care vicinity is defined as a “space within a location intended for the examination and treatment of patients, extending 1.8 m (6ft) beyond the normal location of the bed, chair, table, treadmill or other device that supports the patient during examination and treatment and extending vertically to 2.3 m (7 ft. 6 in.) above the floor.” **NFPA 99 2012 3.3.139**

## Medical-Grade Power Strips (Approved for Use in the Patient Care Vicinity)

- Tested to comply with UL 60601-1.
- Can be used inside or outside the Patient Care Vicinity.
- Can only be used to power Patient Care Related Electrical Equipment.
- Protect patients and staff in the event of a single fault.
- The sum of the ampacity of all appliances connected to the receptacles shall not exceed 75 percent of the ampacity of the flexible cord supplying the receptacles.

## Medical-Grade Power Strips for Mobile Applications (Approved for Use in the Patient Care Vicinity)

- Tested to comply with UL 1363A.
- Can be used inside or outside the Patient Care Vicinity.
- Can only be used to power Patient Care Related Electrical Equipment.
- Require permanent mounting to mobile medical equipment platforms, such as IV poles and crash carts.
- The sum of the ampacity of all appliances connected to the receptacles shall not exceed 75 percent of the ampacity of the flexible cord supplying the receptacles.

## Power Strips for Administrative Areas or Patient Rooms Outside Patient Care Vicinity

### (NOT Approved for Use in the Patient Care Vicinity)

- Tested to comply with UL 1363.
- Cannot be used in the Patient Care Vicinity.
- The sum of the ampacity of all appliances connected to the receptacles shall not exceed 75 percent of the ampacity of the flexible cord supplying the receptacles.





# Fire Watch Procedures

A Fire Watch is a short-term, emergency measure intended to provide an acceptable level of life safety in a building that has an impaired fire safety system. A Fire Watch is a compensatory measure only. The purpose of a Fire Watch is to allow continued occupancy of a facility that may not be safe for building occupants during the time required for implementing appropriate changes or repairs. It is also used to check all areas of the building on a regular basis to make sure no fires have started.

An informal Fire Watch should be implemented IMMEDIATELY when certain conditions are discovered either by the facility or by other authorities.

Examples of when an informal Fire Watch may be required by the Office of the State Fire Marshal (OSFM) include:

- Outage or significant impairment of the fire alarm signaling system.
- Outage or significant impairment of the automatic fire suppression system.
- Outage or significant impairment of the facility water supply.
- Impairment of the facility's exiting system NOT significant enough to warrant evacuation and shutdown of the facility.

## Informal Fire Watch procedures if one of the listed above events is happening:

- ✓ Notify ALL staff and occupants (if appropriate) immediately
- ✓ Informal Fire Watch shall be maintained during the entire period of facility occupancy
- ✓ Person(s) assigned to the Fire Watch SHALL HAVE NO OTHER DUTIES.
- ✓ Informal Fire Watch plans include notification and communication procedures. Portable radios and cellular phones may be used to send an alarm to occupants and emergency response forces.
- ✓ The Fire Watch shall include all areas of the facilities which are affected by the impairment. Special attention shall be paid to storage areas, janitor closets, attics, utility spaces, and other normally unoccupied areas.
- ✓ All areas are to be checked at least hourly. More frequent checks may be mandated if required.

If the fire alarm conditions are expected to exist for over four hours or the suppression system conditions for over 10 hours in a 24-hour period, a formal Fire Watch must be initiated.

## Formal Fire Watch procedures:

- ✓ Notify ALL staff and occupants (if appropriate) immediately
- ✓ Notify the authority having jurisdiction (AHJ) of the Fire Watch condition. The AHJ for all healthcare occupancies in the state of Kansas is the Office of the State Fire Marshal and can be reached at (785) 296-3401. Schools, colleges, and correctional facilities are also required to notify OSFM of fire watch conditions. The afore mentioned occupancies must also notify their local jurisdictions of the Fire Watch condition.
- ✓ Fire Watch shall be maintained during entire period of facility occupancy.
- ✓ Person(s) assigned to the Fire Watch SHALL HAVE NO OTHER DUTIES.
- ✓ Fire Watch shall include ALL AREAS of the facility. Special attention shall be paid to storage areas, janitor closets, attics, utility spaces, and other normally unoccupied areas.
- ✓ Fire Watch rounds shall be continuous. However, all areas are to be checked at least hourly.
- ✓ Healthcare facilities, schools, colleges, and detention facilities must send a log of the Fire Watch round to OSFM at the end of each shift until the situation is corrected. This should be done via facsimile at (785) 296-0151.

**Remember: Fire Watches are compensatory measures only and cannot be used in lieu of compliance with the Kansas Fire Prevention Code.**



# Active Shooter Variances Changes

With the increase in school violence over the last couple of years, OSFM has met with representatives of the State Board of Education, school districts, local law enforcement and fire representatives, school resource officers and others to discuss the need for additional security/lockdown requirements that may be in opposition to the current fire and life safety codes that the state adopted.

The Office of the State Fire Marshal or our designee, inspects all K-12 schools annually under the current state statutes and adopts rules and regulations for fire and life safety codes. Our office has issued variances from the current fire and life safety codes to allow schools to make use of a number of different lockdown devices. Since last year, we have added the Fire Door Armor locking device. Our office is more than willing to continue to work with schools and local first responders to help make sure our schools are safe from any event that may happen in the future.

If there are conflicts with the fire and life safety codes that arise, our office will work with the Board of Education and the school districts to find alternative measures or issue additional variances to help better secure the schools, while at the same, not losing the fire and natural disaster safety measures that are currently in our schools

If you come across new devices and have questions, please contact our office at 785-296-3401 or by email at [prevention@ks.gov](mailto:prevention@ks.gov). You can find additional safety information on our website at [FireMarshal.ks.gov](http://FireMarshal.ks.gov).

## Acceptable devices only DURING intruder situations:

Devices such as the ones below may only be used in an actual active shooter or intruder situation and/or when drills are being performed.

- ♦ Acceptable devices should only be used after training of staff and students has been completed.
- ♦ Barricading of classroom doors as recommended in ALICE training will be allowed.
- ♦ Always be aware that students need the ability to get out in the event of fire.

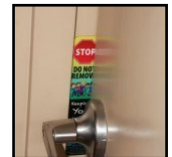
***Having a clear and precise intruder plan that is practiced with local law enforcement and fire departments will help ensure the best protection for students and faculty.***



**Fire Door Armor** enables teachers to immediately lock a door from inside the classroom, as well as allowing responders to unlock from the outside.



**Strip Magnets** allow a teacher to quickly secure their classroom by removing the strip magnet from the frame, which latches the door.



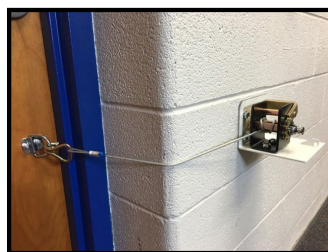
**Barracuda Intruder Defense System** for inward swinging doors.



**Nightlock Lockdown 2**



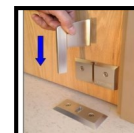
**Guardian Angel Door Security Device** works on OPEN IN, OPEN OUT and DOUBLE DOOR applications.



**The Sleeve** fits around the door's closer arm, securing the door from the inside.



**Nightlock Lockdown** enables teachers to immediately lock a door from inside the classroom



**\*\*Homemade lockdown devices that function like ones already approved by our office can be used in place of ones listed here. Please submit the device you are wanting to use to our office, and then we will get back with the school to let them know whether it has been approved. Contact [joel.c.beckner@ks.gov](mailto:joel.c.beckner@ks.gov) for more information.**





# CMS Facility Corridor Safety Rules



In a state of panic and emergency, like when a fire is happening, seconds can make a difference between life and death. That is why things like keeping a corridor free of obstructions and clutter is so important. In the recent years, Centers for Medicare and Medicaid (CMS) has made some changes to what can and cannot be maintained in corridors. To begin things off, non-continuous projections have to be no more than 6 inches from the corridor wall. This requirement protects people who are blind or have low vision from being injured by bumping into a protruding object that they cannot

detect with a cane. When it comes to corridor clutter, there are different requirements.

Wheeled equipment is allowed with the following requirements in place:

- Shall not reduce corridor width less than 5 feet.
- Fire Safety plan and training program needs to address the relocation during fire and other emergencies.
- Make sure your staff has the answer to the relocation.
- Limited the wheeled equipment to what is in use (CMS says more than 30 minutes).
- Patient lift and transport lift is permitted.

Fixed furniture is allowed in corridors if you meet the following:

- Corridor must be 8 feet – if you can't meet 8 feet, you can't use this allowance.
- Furniture must be securely attached to the floor or the wall.
- Not reducing less than 6 feet.
- One side of the corridor must be clear- no zig zagging back and forth.
- Grouping cannot exceed 50 square feet.
- The grouping must be separated by at least 10 feet.
- Do not obstruct LSC features or building services (i.e. manual pulls, fire extinguishers).
- Corridor must be protected by smoke detection or in direct supervision by staff

Hopefully seeing all these requirements in place will help your facility understand these requirements and keep the facility corridors clear and safe for all residents. If you have any further questions, feel free to reach out to me at [joel.c.beckner@ks.gov](mailto:joel.c.beckner@ks.gov).



# Emergency Preparedness Testing

The Emergency Preparedness requirement that was implemented on Nov. 15, 2017 includes, 0039 *Emergency Prep Testing*, which requires a facility to conduct exercises to test their emergency preparedness plan.

The facility must conduct a tabletop exercise for one of the two testing requirements. This tabletop exercise is a discussion-based session where participants will discuss their roles during an emergency and how the facility will react. Bouncing ideas off each other and talking about how each staff member is to react during an emergency is a very helpful training technique that facilities can use to their advantage.

The second requirement is a full-scale community-based exercise. A full-scale exercise is defined and accepted as any operations-based exercise that assesses a facility's functional capabilities by simulating a response to an emergency that would impact the facility's operations and its given community.

Facilities are expected to contact their local and state agencies and healthcare coalitions, where appropriate, to determine if an opportunity exists and if their participation would fulfill this requirement.

But what if your facility is unable to identify a full-scale community based exercise? Your facility can then conduct an individual, facility-based exercise. The exercise will need to demonstrate how it addresses any risks identified in the facility risk assessment.

Documentation will be required. The facility will need to show what was addressed in the table-top and which risk analysis was used and who attended the exercise. The facility will also need to show documentation of the facility's efforts to identify a full-scale, community-based exercise if they did not participate in one (i.e. date, personnel and agencies contacted and the reasons for the inability to participate in a community-based exercise).



# Decorative Pillows Recalled Due to Fire Hazards

**Name of product:**  
*Decorative Cushions*

**Hazard:** The cushions can catch fire if exposed to an ignition source, posing a fire hazard.

**Remedy:** Refund

**Recall date:** April 18, 2018

**Units:** About 14,500



**Name of product:** Ambiano mini deep fryers

**Hazard:** The deep fryer heating element can overheat, posing fire and burn hazards.

**Remedy:** Refund

**Recall date:** May 10, 2018

**Units:** About 35,000



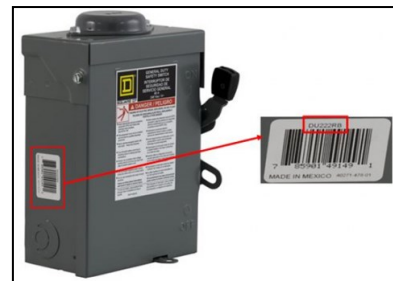
**Name of product:**  
Square D brand  
General Duty 30 &  
60A, 120/240-volt, 2-  
phase and 3-phase  
NEMA 3R Safety  
Switches

**Hazard:** The power can stay on when the safety switch handle is in the "OFF" position, posing an electrical shock or electrocution hazard to consumers.

**Remedy:** Replace

**Recall date:** April 17, 2018

**Units:** About 1,079,000

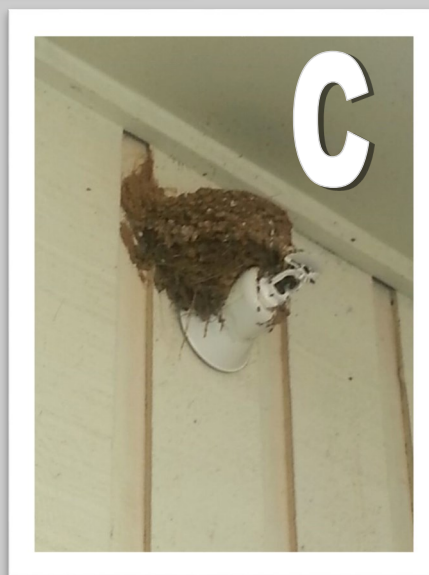


**For more information on these recalls and others and to sign up for direct recall notifications, please visit [www.cpsc.gov](http://www.cpsc.gov).**





# SPOT the violations



**A**

**B**

**C**

**D**

Answers on Page 10



# Sensitivity Testing for Smoke Alarms in Facilities

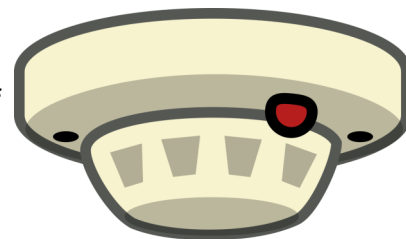
There are many requirements that a facility must keep track of when it comes to the fire code. One of the requirements that is often overlooked is sensitivity testing for smoke alarms. This testing is very important because it will tell the facility if their smoke alarms are calibrated to the correct level where it can properly work in the event of a fire.

The following information from 2010 NFPA 72 regarding sensitivity testing for smoke detectors is important to remember.



- Sensitivity testing is required within one year of install, two years after that and if there are no problems, may be extended to every five years – but only if records of nuisance alarms are maintained. **14.4.5.3.1**
- Sensitivity shall be checked within one year after installation. **14.4.5.3.2**
- Sensitivity shall be checked every alternate year, thereafter, unless otherwise permitted by compliance with 14.4.5.3.3. **14.4.5.3.3**

- After the second required calibration test, if sensitivity tests indicate that the device has remained within its listed and marked sensitivity range (or 4 percent obscuration light gray smoke, if not marked), the length of time between calibration tests shall be permitted to be extended to a maximum of five years. **14.4.5.3.3.1**
- If the frequency is extended, records of nuisance alarms and subsequent trends of these alarms shall be maintained. **14.4.5.3.3.2**
- In zones or in areas where nuisance alarms show any increase over the previous year, calibration tests shall be performed.



With this information provided, this should help facilities understand the process of sensitivity testing and how important it is to do. If you have any further questions, feel free to contact our office at [joel.c.beckner@ks.gov](mailto:joel.c.beckner@ks.gov).



## Working smoke alarms save lives!



Free Smoke Alarm Program

# GetAlarmedKS.org

Answers to Spot the Violations (page 9)

A. ABHR over ignition source; B. Egress door door disguised; C. Bird's nest obstructing sprinkler from working; D. Corridor door blocked open, preventing it from closing.





# CAMPFIRE SAFETY TIPS



With warmer weather fast approaching, the OSFM would like to take a moment and remind you of some safety tips when it comes to enjoying the nice weather outdoors. Here are a few good safety tips when it comes to building a fire at a campground.



1.

**Look Up and Around** – Make sure that you do not start a fire under low hanging branches or near bushes or brush. Keep a good radius around any camping material as well.

2.

**Preparing your Pit** – Clear debris in and around the fire pit including garbage and grass. If there is not a metal ring, make sure to circle the pit with rocks. Fire can spread very easily so with the rocks in place, it will stop the spread.

3.

**Keep Water Nearby** – As mentioned earlier, fires can spread very quickly so having water nearby is important so you can put out the fire quickly if things get out of hand.



4.

**Watchful Eye** – Camping can be a fun time with friends and family and it is very easy to get distracted and leave that fire unattended. It is important to always be alert and around when the fire is still going.



5.

**Extinguishing Before Bed** – When you finally head off to bed, make sure to always put out the fire. Put water or dirt on the fire to put it out. It is a good idea to stir the embers around with a shovel to make sure that a fire will not start and best case the coals should be wet and cold.



This time of the year is always a blast with families and friends planning their camping trips to enjoy the great outdoors. Please take caution when it comes to fire, and keep our campsites safe.



# Home Safety for People with Disabilities

There's no place like home. It is a place to relax, share laughs with family, and enjoy home cooked meals. But did you know that the majority of fire deaths occur in the home? Help everyone in the home stay safe from fire.



## Home Fire Sprinklers

Home fire sprinklers protect lives by keeping fires small. Sprinklers allow people more time to escape in a fire. When choosing an apartment or home, look for one that has home fire sprinklers.

## Smoke Alarms

- » Install smoke alarms in every sleeping room. They should also be outside each sleeping area and on every level of the home.
- » Test your smoke alarm at least once a month by pushing the test button. If you can't reach the alarm, ask for help.
- » For added safety, interconnect the smoke alarms. If one sounds, they all sound. This gives more time to escape.
- » Smoke alarms with sealed (long-life) batteries work for up to 10 years. They can be helpful for people who find it hard to change batteries.
- » Smoke alarms expire. Replace them every 10 years.

## People who are Deaf or Hard of Hearing

- » Smoke alarms and alert devices are available for people who are deaf or hard of hearing.
- » Strobe lights flash when the smoke alarm sounds. The lights warn people of a possible fire.
- » When people who are deaf are asleep, a pillow or bed shaker can wake them so they can escape.
- » When people who are hard of hearing are asleep, a loud, mixed, low-pitched sound alert device can wake them. A pillow or bed shaker may be helpful. These devices are triggered by the sound of the smoke alarm.



## Escape Planning

**Include everyone** in home escape planning. Each person should have input about the best ways to escape. Home fire drills are important. Everyone in the home must participate in them. Keep a phone by your bed in case you can't escape and need to call for help.

**Talk with someone from the fire department** about your escape plan. Ask them **review your plan**. Ask if your fire department keeps a directory of people who may need extra help. If you have a **service animal**, agree on a plan to keep the animal with you during an emergency.



**Your Source for SAFETY Information**

NFPA Public Education Division • 1 Batterymarch Park, Quincy, MA 02169

